

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	LW	68904	12/27/02
O.I.P.E. CLASSIFIER		10	11-8-00
FORMALITY REVIEW	RW	JC4949	12/09/02
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	2-4-03
2	2-25-03
3	2-14-04
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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